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cases. The general situation in the State is stated to be approaching the crest, which is expected shortly.

South Dakota.—On October 22 the number of new cases reported was 1,489 and the number of deaths 40.

Tennessee.—Conditions are greatly improved in nearly all cities and towns, but the disease is slowly spreading in rural districts and mining regions. Up to October 21, 6,054 cases and 99 deaths were reported at Chattanooga and 5,475 cases and 358 deaths at Memphis. Continuous improvement in conditions at Nashville has been noted.

Texas.—Twelve cities report a total of 26,062 cases and 517 deaths since the beginning of the epidemic.

Utah.—Several thousand cases are stated to be present. The epidemic is still spreading.

Vermont.—All places show improvement, except Burlington. In this city 1,000 new cases were reported during the week ended October 19. From 106 towns reports were received of 4,576 cases for that week.

Virginia.—Reports indicate general prevalence of the disease.

Washington.—During the week ended October 19, 4,525 cases were reported.

West Virginia.—Fifty-two towns in 35 counties reported 1,559 new cases and 118 deaths on October 22.

Wisconsin.—Reports of the disease have been received from a large number of places, in some of which the disease is increasing and in others decreasing.

Wyoming.—Twenty-five hundred cases of the disease were reported for a one-week period. The three counties hardest hit were widely separated.

EPIDEMIC INFLUENZA AND THE UNITED STATES PUBLIC HEALTH SERVICE.

Better than volumes of reasoned arguments, the present epidemic of "Spanish" influenza has shown in concrete form how important it is to have attached to the United States Public Health Service a reserve organization which can be mobilized in times of emergency.

With the widespread occurrence of influenza in the vicinity of Boston, and the unmistakable signs of its beginning elsewhere, urgent calls were addressed to the United States Public Health Service to furnish medical and nursing relief to stricken communities. All available regular officers were detailed to the stricken communities, but the number available for such detail was insignificant compared to the urgent need occasioned by the epidemic. Moreover, the bureau had no nurses available for service in epidemic.

In this emergency the Surgeon General called upon the Volunteer Medical Service Corps, the Red Cross, the medical and nursing pro-

fessions as a whole, and on the general public for personnel to help combat the epidemic. At the same time Congress was appealed to for a special appropriation to meet the expenditure required by the emergency. The necessary funds were promptly voted in the following authorization:

"Resolved, That to enable the Public Health Service to combat and suppress 'Spanish influenza' and other communicable diseases by aiding State and local boards of health, or otherwise, including pay and allowances of medical and sanitary personnel, medical and hospital supplies, printing, clerical services, and rent in the District of Columbia and elsewhere, transportation, freight, and such other expenses as may be necessary, there is appropriated, out of any money in the Treasury not otherwise appropriated, \$1,000,000, to be available until June thirtieth, nineteen hundred and nineteen.

"SEC. 2. That the Secretary of War, the Secretary of the Navy, and the Secretary of the Treasury are authorized and directed, respectively, to utilize jointly the personnel and facilities of the Medical Department of the Army, the Medical Department of the Navy, and the Public Health Service, so far as possible, in aiding to combat and suppress the said diseases.

"Approved, October 1, 1918."

In response to the request for physicians available for duty in the Public Health Service the Volunteer Medical Service Corps compiled a list of over 1,000 names classified by States. Appointments were offered by telegraph to these physicians by the Public Health Service, and within 48 hours groups of physicians were on their way to some of the stricken communities in New England, where the epidemic at that time raged most severely. Soon after similar medical units were sent to New Jersey, New York, North Carolina, and to Phoenix, Ariz.

The problem of supplying nurses was much more difficult, for it was found almost impossible to discover nurses or trained attendants who were not already extremely busy on urgent medical work. Nevertheless, a limited number of nurses and trained attendants was secured by the American Red Cross and mobilized for emergency service in the communities most severely affected. In addition to this the attention of local communities was called to the valuable nursing work which could be rendered by intelligent volunteer workers, such as school teachers, especially when they are directed by trained graduate nurses. In many communities the organization of this group of nursing personnel has done much to relieve the serious emergency caused by the lack of trained nurses.

It was made clear from the outset that the United States Public Health Service desired to aid and not supplant State and local health authorities in their work. Accordingly instructions were issued that all requests for medical, nursing, or other emergency aid in dealing

with the epidemic should come to the United States Public Health Service only through the State health officer. Moreover, as soon as possible all this epidemic work was organized on State lines, with a representative of the United States Public Health Service detailed to each State to secure the best possible organization and coordination of health activities of the service; in others the executive of the State board of health has been given appointment in the United States Public Health Service as field director.

With the extension of the epidemic and the increasing demands made on the Public Health Service, welcome aid in securing physicians was furnished by the American Medical Association and by medical journals and newspapers which published appeals to physicians to offer their services. As a result, the Public Health Service now (Oct. 22) has over 600 physicians and 50 miscellaneous employees (nurses, clerks, stenographers, etc.) on duty in various States. This does not include the nurses and nurses' aids serving under the Red Cross.

While the activities of the doctors and nurses working under the Public Health Service are generally limited to those ordinarily regarded as preventive health measures, emergency conditions in some communities have been such that much medical relief work has had to be undertaken. This was the case, for example, in several communities where the few practicing physicians were themselves stricken and where the people were in urgent need of medical attention.

While the epidemic is subsiding along the Atlantic seaboard, it appears to be increasing in prevalence in the Central States. Physicians and nurses are therefore still needed. The latter should apply to their local Red Cross chapter, which will attend to their enrollment and assignment to duty. Physicians who are ready to undertake service in the United States Public Health Service should communicate directly with the bureau representative in their respective States. Address United States Public Health officer in charge, care of State board of health.

PRELIMINARY REPORT ON CARBON TETRACHLORIDE VAPOR AS A DELOUSING AGENT.

By M. H. FOSTER, Surgeon, United States Public Health Service.

The effectiveness of dry and moist heat and hydrocyanic acid gas as a means of destroying body lice on clothing has been thoroughly investigated. These processes, while effective, require the use of somewhat complicated apparatus, which is not easily transported and not always available for troops in actual warfare. Also, in civilian life the problem of cleaning up lousy clothing without special